UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMPTION

OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	
Estimated average	je burden
hours per respons	se 16.00
-	·-

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

00040010	UNIFORM LIMITED OFFERING EX	EMPTION
- -	his is an amendment and name has changed, and indicate change ering for Sherwood Advisors, LLC	
	pply): Rule 504 Rule 505 Rule 506 Section	n 4(6) ULOE (NECLIVED COLOR OF THE COLOR OF
	A. BASIC IDENTIFICATION DATA	OCT to proper
1. Enter the information requeste	ed about the issuer	
Name of Issuer (check if this Sherwood Advisors, LLC	is an amendment and name has changed, and indicate change.)	203
Address of Executive Offices	(Number and Street, City, State, Zip Co	ode) Telephone Number (Including Area Code)
Parkwest Finance Station, Bo	x 21013, New York, NY 10025	212-663-6976
Address of Principal Business Oper (if different from Executive Office		Code) Telephone Number (Including Area Code)
730 Columbus Avenue #2c, N	ew York, NY 10025	
Brief Description of Business		
Investment advisor with a focu projects.	us on prodiving investors options for derecting a portion o	of fees toward philanthropic and other social impact
Type of Business Organization corporation business trust	☐ limited partnership, already formed	other (please specify): LLC PROCESSED
	Month Year	CCT 10 coop

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

0 6

CN for Canada; FN for other foreign jurisdiction)

0

Actual Estimated

DE

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

14,000

SEC 1972 (6-02)

Check Box(es) that Apply:	Prome	oter 🗸	Beneficial Owner	V	Executive Officer	1	Director	Ø	General and/or Managing Partner
ull Name (Last name first, Malhotra, Rimmy	if individual)	· · · · · · · · · · · · · · · · · · ·	<u> </u>						
dusiness or Residence Addre 730 Columbus Avenue			et, City, State, Zip C 0025	ode)					
Check Box(es) that Apply:	Prome	oter 🗹	Beneficial Owner	Z	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, Ben-Zvi, Yaron	if individual)	1					-		
Business or Residence Addre			et, City, State, Zip C	ode)				_	
17 Atlantic Avenue, Apt.									
Check Box(es) that Apply:	Promo	oter 🖊	Beneficial Owner	Z	Executive Officer	Z	Director	Ø	General and/or Managing Partner
Full Name (Last name first, Smith, Todd	if individual)	1							
Business or Residence Addr 730 Columbus Avenue #			et, City, State, Zip C 0025	ode)					
Check Box(es) that Apply:	Prome	oter [Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual))		•					
Business or Residence Addre	ess (Numbe	er and Stre	et, City, State, Zip C	ode)					
Check Box(es) that Apply:	Promo	oter [Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
			Beneficial Owner		Executive Officer		Director		
Full Name (Last name first,	if individual))		ode)	Executive Officer		Director		
Full Name (Last name first, Business or Residence Addre	if individual)	er and Stre		ode)	Executive Officer Executive Officer		Director		
Full Name (Last name first, Business or Residence Addre Check Box(es) that Apply:	if individual) css (Numbe	er and Stre	et, City, State, Zip C	ode)					Managing Partner General and/or
Check Box(es) that Apply: Full Name (Last name first, Business or Residence Addre Check Box(es) that Apply: Full Name (Last name first, Business or Residence Addre	if individual) css (Number Promo	er and Stre	et, City, State, Zip C						Managing Partner General and/or
Full Name (Last name first, Business or Residence Addre Check Box(es) that Apply: Full Name (Last name first, Business or Residence Addre	if individual) css (Number Promo	oter oter	et, City, State, Zip C Beneficial Owner						Managing Partner General and/or
Full Name (Last name first, Business or Residence Addre Check Box(es) that Apply: Full Name (Last name first,	if individual) css (Number Promo if individual) ess (Number Promo	er and Stre	et, City, State, Zip C Beneficial Owner et, City, State, Zip C		Executive Officer		Director		Managing Partner General and/or Managing Partner General and/or

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized within the past five years;

1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						Yes	No IX					
	Answer also in Appendix, Column 2, if filing under ULOE.												
2.	2. What is the minimum investment that will be accepted from any individual?									\$_25,000.00			
3.	3. Does the offering permit joint ownership of a single unit?									Yes	No		
4.	If a pers or state a broke	ssion or sim son to be lis s, list the na r or dealer	ilar remune sted is an ass ame of the b you may s	ration for sociated per roker or do et forth the	solicitation erson or age ealer. If mo	of purchasent of a broker ore than five	ers in conne ker or deale c (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	irectly, any he offering, with a state ons of such		
Ful	1 Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, Ci	ity, State, Z	Lip Code)			<u> </u>			<u>.</u> .
_													
Nar	me of As	sociated Bi	oker or De	aler									
Sta	tes in WI	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	l States)							☐ Al	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)						-		-	
- Dave		Dagidanaa	Address (1	J	d Canada C	Cian Cana	Zin Code						
Dus	SINCSS 01	Residence	Address (i	vuinber an	ia Sireet, C	ity, state,	Zip Code)						
Nar	me of As	sociated Bi	oker or De	aler									
Stat	tes in Wi	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						 -
	(Check	"All States	s" or check	individual	States)			•••••	••••••		•••••	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (?	Number an	id Street, C	ity, State,	Zip Code)	· -					
Nar	me of As	sociated Br	oker or De	aler									
ivai	ine or As	socialed Di	oker of be	aici									
Sta			Listed Has		•				_				
	(Check	"All State:	s" or check	individua!	l States)							☐ Al	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

B. INFORMATION ABOUT OFFERING

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	s 0.00	s 0.00
Equity		\$ 0.00
☐ Common ☐ Preferred	<u> </u>	
Convertible Securities (including warrants)	_{\$} 750,000.00	0.00
Partnership Interests		\$ 0.00
Other (Specify)		\$ 0.00
Total	=== 000 00	\$ 0.00
Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	
offering and the aggregate dollar amounts of their purchases. For offerings under Rule 50 the number of persons who have purchased securities and the aggregate dollar amou purchases on the total lines. Enter "0" if answer is "none" or "zero."	nt of their	Aggregate
	Number Investors	Dollar Amount of Purchases
Accredited Investors		§ 0.00
Non-accredited Investors		\$ 0.00
Total (for filings under Rule 504 only)		§ 0.00
Answer also in Appendix, Column 4, if filing under ULOE.		
If this filing is for an offering under Rule 504 or 505, enter the information requested for all sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months p first sale of securities in this offering. Classify securities by type listed in Part C — Qu	orior to the destion 1.	
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505	0	\$ 0.00
Regulation A		\$ 0.00
Rule 504		\$ 0.00
Total		\$ 0.00
		~
a. Furnish a statement of all expenses in connection with the issuance and distribut securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp not known, furnish an estimate and check the box to the left of the estimate.	he insurer.	
securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp	he insurer. enditure is	\$_0.00
securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp not known, furnish an estimate and check the box to the left of the estimate.	he insurer. enditure is	\$
securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	he insurer. enditure is	\$
securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs	he insurer. enditure is	\$ \$_500.00
securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees	he insurer. enditure is	\$ 500.00 \$ 6,000.00 \$ 0.00
securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	he insurer. enditure is	\$ 500.00 \$ 6,000.00 \$ 0.00 \$ 0.00
securities in this offering. Exclude amounts relating solely to organization expenses of t The information may be given as subject to future contingencies. If the amount of an exp not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	he insurer. enditure is	\$ 500.00 \$ 6,000.00 \$ 0.00 \$ 0.00

	b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	5	740,000.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used fo each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	l	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	∡ \$ <u>380,000.0</u> C	2 \$_0.00
	Purchase of real estate	2 \$ 0.00	<u>_</u> \$_0
	Purchase, rental or leasing and installation of machinery and equipment	✓ \$ 0.00	Z \$_0.00
		V \$ 0.00	\$ 35,000.00
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	⊘ \$ ^{0.00}	2 \$_0.00
	Repayment of indebtedness	V \$ 0.00	2 \$_0.00
	Working capital	▼ \$ 0.00	\$ 325,000.00
		\$_0.00	2 \$_0.00
		\$_0.00	\$_0.00
	Column Totals		\$ 360,000.00
	Total Payments Listed (column totals added)	□ \$ <u></u> \$	0,000.00
	D. FEDERAL SIGNATURE		`

Issuer (Print or Type)	Signature Date	
Sherwood Advisors, LLC	Minus MMV 10/04/2006	
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Rahul Malhotra	CEO	

ATTENTION —————

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)